



WORKPLACE INJURY PRESCRIPTION INFORMATION

Employer:

Please fill out the employee information below and provide the employee with this document to take to any pharmacy for their workplace injury prescriptions.

Employee:

PMA Companies has partnered with **Cadence Rx** to make filling workers' compensation prescriptions easy. Medications may be subject to formulary and pre-authorization requirements. Please take this letter and your prescription(s) to a pharmacy near you.

Cadence Rx has a network of over 72,000 pharmacies nationwide. To locate a network pharmacy near you, please use the pharmacy locator at <https://cadencerx.com/find-a-pharmacy/> or call Cadence Rx toll-free at 1-888-813-0023.



This document serves as a temporary prescription card. A permanent prescription card specific to your work-related injury or illness will be forwarded directly to you if your claim is deemed compensable for pharmacy benefits.

IF YOU HAVE QUESTIONS OR NEED ASSISTANCE AT THE PHARMACY, PLEASE CALL 888-813-0023

Pharmacist:

Please obtain the below information from the injured employee to process prescriptions for the workplace injury only. Please do not send the patient home or have the patient pay for medication(s) before calling Cadence Rx for assistance.

Note: Certain medications are pre-approved for this patient; these medications will process without an authorization. All others will require prior approval.

| Prescription Drug ID Card | | Pharmacy Information | |
|---|-----------------------------------|---|--|
|   | | <p>This form allows you to fill your initial prescriptions with a maximum cost of \$500 per medication and no more than a 14-day supply per prescription. Pharmacy, if you need assistance processing this claim, please call 1-888-813-0023.</p> <p>The pharmacy benefit card is only to be used for medications prescribed for your work-related injury. By using this card, you acknowledge and accept financial responsibility for any prescriptions billed under this card that are later found to be unrelated to your injury.</p> <ul style="list-style-type: none"> Member ID format: The ID must start with FF followed by the last 4 digits of the social security number plus 8- digit DOI (MMDDYYYY). Example: FF999901012018 | |
| Employee Name: | | | |
| Member ID Number* | *Refer to Member ID Format | | |
| Date of Injury: | | | |
| Group Number: | PMACRX | | |
| PCN Number: | CRX | | |
| BIN Number: | 021460 | | |
| Card Created On: ___/___/___ | | | |



Participating Pharmacies:

Below are some of the major pharmacy chains Cadence Rx partners with:

| | | |
|---------------------|------------------------|------------------------------|
| Acme Pharmacy | Hannaford | Rite Aid |
| Albertson's | Harris Teeter | Safeway |
| Aurora Pharmacy | HEB Grocery | Sam's Club |
| Bartell Drugs | HY-VEE Pharmacy | Sav Mor Drug Stores |
| Big Y | Ingles Markets | Save Mart |
| Bi-Lo | King Sooper's Pharmacy | Shaw's |
| Bi-Mart | Kinney Drugs | Shoprite |
| Brooks | Kroger Pharmacy | Smith's Food and Drug Center |
| Brookshire Brothers | Kmart Pharmacy | Snyder |
| Brookshire Grocery | Leader Drug Stores | Stop and Shop Pharmacy |
| Carrs | Longs Drug Store | SuperValu Pharmacy |
| Costco | Marsh Drugs | Target Pharmacy |
| CVS | Medicap | Thrifty Drugs |
| Dillons | Medicine Shoppe | Tom Thumb |
| Discount Drug Mart | Meijer Pharmacy | Tops |
| Eckerd Drug | New Albertson's | United Pharmacy |
| EPIC Pharmacy | Osco | Vons |
| Food City | Price Chopper | Walgreens |
| Food Lion | Publix | Walmart |
| Fred Meyer | Raley's Drug Center | Wegmans |
| Fry's Food and Drug | Ralphs | Weis |
| Giant Eagle | Randalls | Winn Dixie |